

No. W 87515		Due no later than Oct 31, 2017 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. PITA PIT GAF, LLC KATHLEEN BRUEHER 505 EAST FRONT AVENUE COEUR D'ALENE ID 83814 USA		JACK T RIGGS MD 505 EAST FRONT AVENUE COEUR D'ALENE ID 83814			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name JACK T RIGGS, M.D.	Street or PO Address 505 EAST FRONT AVENUE		City COEUR D'ALENE	State ID	Country USA	Postal Code 83814
5. Organized Under the Laws of: ID W 87515		6. Annual Report must be signed.* Signature: Robert J. Fasnacht Name (type or print): Robert J. Fasnacht Date: 10/18/2017 Title: Authorized Agent					
Processed 10/18/2017 * Electronically provided signatures are accepted as original signatures.							